



**COMPLETE ALL INFORMATION ON THIS PAGE PRIOR TO CIRCULATION**  
(Petition filing deadline – before 4 p.m. of the 57th day before the primary election) (N.J.S.A. 19:24-4)

Total Number of Signatures on this Petition \_\_\_\_\_

Total Number of Signatures on all Petitions \_\_\_\_\_

CONGRESSIONAL DISTRICT NUMBER \_\_\_\_\_

**STATE OF NEW JERSEY  
PRIMARY ELECTION  
PETITION FOR DISTRICT DELEGATES/ALTERNATES  
CANDIDATES TO THE REPUBLICAN NATIONAL CONVENTION  
100 Signatures Required  
(N.J.S.A. 19:24-4)**

To The Honorable Attorney General:  
(N.J.S.A. 19:24-4)

Each signer of this petition certifies that the following statements are true:

- 1) I reside in the State of New Jersey in the \_\_\_\_\_ Congressional District;
- 2) I am a qualified voter of the State of New Jersey;
- 3) I am a member of the \_\_\_\_\_ party;
- 4) I intend to affiliate with the said party at the ensuing election;
- 5) I endorse the person(s) herein mentioned as candidate(s) for the above stated Delegate/Alternate position(s) to the National Convention;
- 6) I request that you print upon the official primary ballots of said party the name(s) of said person(s) as a candidate for such position. (N.J.S.A. 19:23-7; N.J.S.A. 19:24-3; N.J.S.A. 19:24-4; N.J.S.A. 19:24-5)

**CANDIDATES' REQUEST FOR DESIGNATION OR SLOGAN ON THE OFFICIAL PRIMARY BALLOT**

The candidates herein having been endorsed for the office mentioned in this petition, do hereby request that there be printed opposite the names of the candidates on the said primary ballot the following slogan:

\_\_\_\_\_  
(Please Print or Type)

(The designation or slogan must not exceed six words.) (N.J.S.A. 19:23-17)

**NOTE:** No such designation or slogan shall include or refer to the name of any person or any incorporated association of this State unless the written consent of such person or incorporated association of this State or their authorized representative is filed with this petition of nomination.

**CHOICE FOR PRESIDENT**

(N.J.S.A. 19:24-5)

**(OPTIONAL)**

Please place the name of the candidate for President whom we favor, opposite our individual names or opposite our group of names. The candidate has signed his permission below allowing the use of his name.

I consent to the use of my name to be shown opposite the names or groups of names of the district delegates and alternate district delegates.

\_\_\_\_\_  
Signature of Choice for President

**Signature of Choice for President is REQUIRED if this option is exercised.**

## COMMITTEE ON VACANCIES

(The Committee on Vacancies may only fill a vacancy up to 48 days before the Primary Election) (N.J.S.A.19:23-12)

This committee shall have power in case of resignation or otherwise of the person endorsed as a candidate in said petition to fill such a vacancy by filing with the Attorney General, a certificate of nomination to fill the vacancy.

**Note:** It is not mandatory to have a "Committee on Vacancies".

The names and post office addresses of the three members named as a committee on vacancies are as follows:

Name(s)	Number, Street or Avenue	City	Zip Code
_____	_____ (Please Print or Type)	_____	_____
_____	_____ (Please Print or Type)	_____	_____
_____	_____ (Please Print or Type)	_____	_____

List candidates in the order in which they are to appear on the ballot. Names must appear the same on all petitions to be filed.

**Please print or type on lines below.**

Name of District Delegate	Address	City	Zip Code
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1.	_____	_____	_____
	(Place of Residence)		

	_____	_____	_____
	(Post Office Address)		

2.	_____	_____	_____
	(Place of Residence)		

	_____	_____	_____
	(Post Office Address)		

3.	_____	_____	_____
	(Place of Residence)		

	_____	_____	_____
	(Post Office Address)		

Name of District Alternate	Address	City	Zip Code
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1.	_____	_____	_____
	(Place of Residence)		

	_____	_____	_____
	(Post Office Address)		

2.	_____	_____	_____
	(Place of Residence)		

	_____	_____	_____
	(Post Office Address)		

3.	_____	_____	_____
	(Place of Residence)		

	_____	_____	_____
	(Post Office Address)		

The candidates herein request that they be grouped together on the ballot (N.J.S.A. 19:24-5)  
**EACH CANDIDATE MUST SIGN A CERTIFICATE OF ACCEPTANCE AND AN OATH OF ALLEGIANCE**

## SIGNATURE SHEET

Signature and residence address of registered voter:

1.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
2.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
3.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
4.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
5.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
6.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
7.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
8.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
9.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
10.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)

## SIGNATURE SHEET

Signature and residence address of registered voter:

11.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
12.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
13.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
14.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
15.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
16.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
17.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
18.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
19.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
20.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)

## SIGNATURE SHEET

Signature and residence address of registered voter:

21.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
22.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
23.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
24.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
25.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
26.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
27.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
28.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
29.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
30.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)

## SIGNATURE SHEET

Signature and residence address of registered voter:

31.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
32.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
33.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
34.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
35.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
36.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
37.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
38.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
39.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)
40.	_____ Signature	_____ Print Name
	_____ Residence Address(Number and Street)	_____ (City)

## SIGNATURE SHEET

Signature and residence address of registered voter:

41.	Signature	Print Name
	Residence Address(Number and Street)	(City)
42.	Signature	Print Name
	Residence Address(Number and Street)	(City)
43.	Signature	Print Name
	Residence Address(Number and Street)	(City)
44.	Signature	Print Name
	Residence Address(Number and Street)	(City)
45.	Signature	Print Name
	Residence Address(Number and Street)	(City)
46.	Signature	Print Name
	Residence Address(Number and Street)	(City)
47.	Signature	Print Name
	Residence Address(Number and Street)	(City)
48.	Signature	Print Name
	Residence Address(Number and Street)	(City)
49.	Signature	Print Name
	Residence Address(Number and Street)	(City)
50.	Signature	Print Name
	Residence Address(Number and Street)	(City)



## SIGNATURE SHEET

Signature and residence address of registered voter:

51.	Signature	Print Name
	Residence Address(Number and Street)	(City)
52.	Signature	Print Name
	Residence Address(Number and Street)	(City)
53.	Signature	Print Name
	Residence Address(Number and Street)	(City)
54.	Signature	Print Name
	Residence Address(Number and Street)	(City)
55.	Signature	Print Name
	Residence Address(Number and Street)	(City)
56.	Signature	Print Name
	Residence Address(Number and Street)	(City)
57.	Signature	Print Name
	Residence Address(Number and Street)	(City)
58.	Signature	Print Name
	Residence Address(Number and Street)	(City)
59.	Signature	Print Name
	Residence Address(Number and Street)	(City)
60.	Signature	Print Name
	Residence Address(Number and Street)	(City)

## SIGNATURE SHEET

Signature and residence address of registered voter:

61.	Signature	Print Name
	Residence Address(Number and Street)	(City)
62.	Signature	Print Name
	Residence Address(Number and Street)	(City)
63.	Signature	Print Name
	Residence Address(Number and Street)	(City)
64.	Signature	Print Name
	Residence Address(Number and Street)	(City)
65.	Signature	Print Name
	Residence Address(Number and Street)	(City)
66.	Signature	Print Name
	Residence Address(Number and Street)	(City)
67.	Signature	Print Name
	Residence Address(Number and Street)	(City)
68.	Signature	Print Name
	Residence Address(Number and Street)	(City)
69.	Signature	Print Name
	Residence Address(Number and Street)	(City)
70.	Signature	Print Name
	Residence Address(Number and Street)	(City)

## SIGNATURE SHEET

Signature and residence address of registered voter:

71.	Signature	Print Name
	Residence Address(Number and Street)	(City)
72.	Signature	Print Name
	Residence Address(Number and Street)	(City)
73.	Signature	Print Name
	Residence Address(Number and Street)	(City)
74.	Signature	Print Name
	Residence Address(Number and Street)	(City)
75.	Signature	Print Name
	Residence Address(Number and Street)	(City)
76.	Signature	Print Name
	Residence Address(Number and Street)	(City)
77.	Signature	Print Name
	Residence Address(Number and Street)	(City)
78.	Signature	Print Name
	Residence Address(Number and Street)	(City)
79.	Signature	Print Name
	Residence Address(Number and Street)	(City)
80.	Signature	Print Name
	Residence Address(Number and Street)	(City)

## SIGNATURE SHEET

Signature and residence address of registered voter:

81.	Signature	Print Name
	Residence Address(Number and Street)	(City)
82.	Signature	Print Name
	Residence Address(Number and Street)	(City)
83.	Signature	Print Name
	Residence Address(Number and Street)	(City)
84.	Signature	Print Name
	Residence Address(Number and Street)	(City)
85.	Signature	Print Name
	Residence Address(Number and Street)	(City)
86.	Signature	Print Name
	Residence Address(Number and Street)	(City)
87.	Signature	Print Name
	Residence Address(Number and Street)	(City)
88.	Signature	Print Name
	Residence Address(Number and Street)	(City)
89.	Signature	Print Name
	Residence Address(Number and Street)	(City)
90.	Signature	Print Name
	Residence Address(Number and Street)	(City)

## SIGNATURE SHEET

Signature and residence address of registered voter:

91.	Signature	Print Name
	Residence Address(Number and Street)	(City)
92.	Signature	Print Name
	Residence Address(Number and Street)	(City)
93.	Signature	Print Name
	Residence Address(Number and Street)	(City)
94.	Signature	Print Name
	Residence Address(Number and Street)	(City)
95.	Signature	Print Name
	Residence Address(Number and Street)	(City)
96.	Signature	Print Name
	Residence Address(Number and Street)	(City)
97.	Signature	Print Name
	Residence Address(Number and Street)	(City)
98.	Signature	Print Name
	Residence Address(Number and Street)	(City)
99.	Signature	Print Name
	Residence Address(Number and Street)	(City)
100.	Signature	Print Name
	Residence Address(Number and Street)	(City)

## AFFIDAVIT OF PERSON WHO CIRCULATES THIS PETITION AND WITNESSES SIGNATURES

The witness taking the affidavit below must be the person who obtained the names on this set of signatures or several sets of signatures. The witness must sign an affidavit in the presence of a person authorized to administer affidavits (e.g., notary public), and sign one signature sheet endorsing the candidate.

State of New Jersey :

: ss.

County of \_\_\_\_\_ :

I, \_\_\_\_\_, being duly sworn, upon my oath say that I am one of the  
(Print Name of Circulator/Witness)

signers of this petition; that such petition was signed by each of the signers thereof in his/her own proper handwriting; that each of such signers is, to the best of my knowledge and belief, a legal voter of the State of New Jersey, and belongs to the political party named in said petition and that such petition is prepared and filed in absolute good faith for the sole purpose of endorsing the person herein named in order to secure his or her nomination or selection.

Sworn and subscribed to before me at

\_\_\_\_\_, N.J.,

\_\_\_\_\_  
(Signature of Circulator/Witness)

this \_\_\_\_\_ day of  
(Day)

\_\_\_\_\_  
(Street Address of Circulator/Witness)

\_\_\_\_\_, 20\_\_\_\_\_  
(Month) (Year)

\_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(Zip Code)

\_\_\_\_\_

(This petition for District Delegates and Alternate District Delegates must contain 100 signatures and although the signature sheets are solicited separately, the entire petition must be bound together before submitting to the Attorney General.)

## OATH OF ALLEGIANCE

State of New Jersey :  
: ss.

County of \_\_\_\_\_ :

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people. So help me God.

Sworn and subscribed to before me at

\_\_\_\_\_  
Signature of Delegate

\_\_\_\_\_, N.J.,

this \_\_\_\_\_ day of  
(Day)

\_\_\_\_\_, 20\_\_\_\_\_  
(Month) (Year)

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## CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY DELEGATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I accept the nomination herein and that I am a resident of and a legal voter in the jurisdiction of the office for which the nomination is being made.

\_\_\_\_\_  
(Signature of Delegate)

\_\_\_\_\_  
(Printed or Typewritten Name of Delegate)

\_\_\_\_\_  
(Residence Address)

\_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(Zip Code)

**Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance**

## OATH OF ALLEGIANCE

State of New Jersey :  
: ss.

County of \_\_\_\_\_ :

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people. So help me God.

Sworn and subscribed to before me at

\_\_\_\_\_  
Signature of Delegate

\_\_\_\_\_, N.J.,

this \_\_\_\_\_ day of  
(Day)

\_\_\_\_\_, 20\_\_\_\_\_  
(Month) (Year)

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(N.J.S.A. 19:23-15)

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\_\_\_\_\_  
(Signature of Delegate)

\_\_\_\_\_  
(Printed or Typewritten Name of Delegate)

\_\_\_\_\_  
(Residence Address)

\_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(Zip Code)

**Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance**



## OATH OF ALLEGIANCE

State of New Jersey :  
: ss.

County of \_\_\_\_\_ :

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people. So help me God.

Sworn and subscribed to before me at

\_\_\_\_\_  
Signature of Delegate

\_\_\_\_\_, N.J.,

this \_\_\_\_\_ day of  
(Day)

\_\_\_\_\_, 20\_\_\_\_\_  
(Month) (Year)

\_\_\_\_\_

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## CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY DELEGATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I accept the nomination herein and that I am a resident of and a legal voter in the jurisdiction of the office for which the nomination is being made.

\_\_\_\_\_  
(Signature of Delegate)

\_\_\_\_\_  
(Printed or Typewritten Name of Delegate)

\_\_\_\_\_  
(Residence Address)

\_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(Zip Code)

**Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance**

## OATH OF ALLEGIANCE

State of New Jersey :  
: ss.

County of \_\_\_\_\_ :

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people. So help me God.

Sworn and subscribed to before me at

\_\_\_\_\_  
Signature of Delegate

\_\_\_\_\_, N.J.,

this \_\_\_\_\_ day of  
(Day)

\_\_\_\_\_, 20\_\_\_\_\_  
(Month) (Year)

\_\_\_\_\_

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## CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY DELEGATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I accept the nomination herein and that I am a resident of and a legal voter in the jurisdiction of the office for which the nomination is being made.

\_\_\_\_\_  
(Signature of Delegate)

\_\_\_\_\_  
(Printed or Typewritten Name of Delegate)

\_\_\_\_\_  
(Residence Address)

\_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(Zip Code)

**Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance**

## OATH OF ALLEGIANCE

State of New Jersey :

: ss.

County of \_\_\_\_\_ :

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people. So help me God.

Sworn and subscribed to before me at

\_\_\_\_\_  
Signature of Delegate

\_\_\_\_\_, N.J.,

this \_\_\_\_\_ day of  
(Day)

\_\_\_\_\_, 20\_\_\_\_\_  
(Month) (Year)

\_\_\_\_\_

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## CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY DELEGATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I accept the nomination herein and that I am a resident of and a legal voter in the jurisdiction of the office for which the nomination is being made.

\_\_\_\_\_  
(Signature of Delegate)

\_\_\_\_\_  
(Printed or Typewritten Name of Delegate)

\_\_\_\_\_  
(Residence Address)

\_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(Zip Code)

**Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance**

## OATH OF ALLEGIANCE

State of New Jersey :

: ss.

County of \_\_\_\_\_ :

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey; that I will bear true faith and allegiance to the same and to the Governments established in the United States and in this State, under the authority of the people. So help me God.

Sworn and subscribed to before me at

\_\_\_\_\_  
Signature of Delegate

\_\_\_\_\_, N.J.,

this \_\_\_\_\_ day of  
(Day)

\_\_\_\_\_, 20\_\_\_\_\_  
(Month) (Year)

\_\_\_\_\_

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## CERTIFICATE OF ACCEPTANCE TO BE SIGNED BY DELEGATE

(N.J.S.A. 19:23-15)

I, the undersigned, hereby certify that I accept the nomination herein and that I am a resident of and a legal voter in the jurisdiction of the office for which the nomination is being made.

\_\_\_\_\_  
(Signature of Delegate)

\_\_\_\_\_  
(Printed or Typewritten Name of Delegate)

\_\_\_\_\_  
(Residence Address)

\_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(Zip Code)

**Candidate Must Sign an Oath of Allegiance and Certificate of Acceptance**